

PENDLETON (L. W.)

The Physician and His Neighbor.

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ADDRESS

TO THE

GRADUATING CLASS, ALBANY MEDICAL COLLEGE,

Commencement Day, March 19, 1890,

BY

LEWIS W. PENDLETON, M.D.,

PORTLAND, MAINE.

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*Reprint from the ALBANY MEDICAL ANNALS, April, 1890.*

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I see before me a band of young men who have been for years working in sympathy with each other and under the direction of other men. To-day that band is broken, and the work henceforth will be individual and separate. It interests the mind always to look upon numbers united in a common object, but when one views such a sight through the vista of years, and with the retrospect of one's own experience for a background, it thrills the heart.

To the mind of the sensitive and conscientious physician there is something at times appalling in the loneliness of his work. However able may be his counsellors and associates, there rests upon him, in the management of his own cases, an individual responsibility which makes his contest with disease a single-handed combat. You are not now fully conscious of the power that comes from sympathy and association, but when you have for years fought this single-handed combat with death and disease, you will realize my own emotions in addressing you on such an occasion as this.

I do not propose, however, to dwell upon the theme of your past relations to each other, nor will I attempt, to-day, to supplement the able instruction you have here received, by a dissertation on any technical subject. I will give you a disquisition rather than a discussion, and will invite you to walk out with me into the fields of practice and view your new profession in some of its social and external relations. The subject I propose for this afternoon is "The Physician and his Neighbor." In starting out upon our round of non-professional visits, courtesy requires that we make our first call on the old doctor. You will carry into his presence the ardor of fresh enthusiasm. You will receive from him a cordial welcome, its warmth a little tempered by thoughts drawn from sober experience. It really requires a good deal

of kindly feeling to harmonize the difference between the old doctor, who has salted down with his prejudices and old-time notions a wealth of practical wisdom and a store of sound common sense, and the young graduate, who is overflowing with expectation and yeasty with new theories. There is due the old man from the young man more respect of speech and deference of manner than is usually accorded. On the other side there is due the young man from the old man more of what he really has to give—practice. To one who needs dollars and cents there is something almost irritating in the bland condescension of the well-established man, and the interest he takes in suggesting a good field for him—say in Alaska or Oklahoma. The young man has words enough already, and he cannot always “look up and be hopeful, like a man drinking from a jug.”

It would be well if the custom were more general than it is for the old doctor and the young to combine their forces. How pleasant for the old doctor, when the bell rings in the middle of a frosty night, to pull his night-cap a little closer over his ears and think, as the door slams behind his alert colleague, that it is healthy for young blood to be stirred.

The old-time preceptor has lost his grip on the student, but the summer school and the college cannot give the homely practical wisdom gathered in the daily round of visits, and it is not feasible for the young doctor to make that sort of instruction, which was once preliminary, supplementary to the school course?

I will not now detain you for that supplementary course, and we will pass on.

Going from one individual to another among the members of your profession, you will find them, altogether, a body of genial, resolute, self-denying men, devoted to their work and jealous of professional honor. Sometimes, alas! jealous of each other. It is notorious that the rivalries are more intense and the jealousies more bitter between members of our profession, especially when of the same age, than between those of other professions, and this fact it is hard to explain. The individuality of our work seems to be hardly

a sufficient explanation, for, after all, there is a strong fraternal feeling lying deeper, which may never come to the surface except in time of need.

The spirit of competition between physicians, even where it runs highest, I feel sure is not incompatible with a strong regard, a respect for each other amounting oftentimes to veneration. If this competition has its origin in the struggle for fees, we might learn from our neighbor, the business man, something better than the spirit of trade. We really need to cultivate his habits of method, system and punctuality in matters of debit and credit. Here again the old form of student life had an advantage over the present custom, in that it gave the student a taste of the science of economics while he kept his master's books and learned how to collect his bills.

One hundred thousand persons in the United States claim the title of Doctor, and several thousand graduates come from the medical schools each year, and yet we speak of the loneliness of the physician's work. The fact is, we do not strengthen, as we might, the possible bonds of association and intercourse. Ten men heartily combined are ten men raised to the tenth power. If our profession is a power for good, whatever coördinates our efforts enhances their value beyond measure. Institutions of charity and of education should not be the only means of uniting our forces. The County and State Associations deserve larger attendance and heartier support. Little clubs and coteries should be more frequently formed for reciprocal help and improvement. The last medical journal may seem more edifying than the trite discussion, the cosy seat by one's fireside may be more attractive than the dusty settee, but the general influence of these meetings will tell in the end, in the growth of mutual understanding, of cordial intimacy and neighborly feeling. The man who helps his fellow, as well as himself, who is generous in spite of the meanness and selfishness of his neighbor, is the one most likely to win and to hold success. After all, we must be guided, in our relations with one another, by native sense of right and honor, rather than by any formal code,

When we have made our duty-calls on members of our own profession, let us drop in upon those near neighbors who are most closely allied to us in other professions.

We are deeply indebted to the Journalist, the Pharmacist, the Botanist, the Scientist.

What an advantage does the medical journal, with its present high character, offer to the young man! He can store his mind with the wisdom of a multitude of practical workers, and his patients can reap the benefits of a wide experience, without waiting for his years to ripen. I think one danger to their real merit threatens in the tendency to diffuseness and profuseness. A good deal of boiling down would suit the busy men, who snatch their reading as passengers on a railway snatch their meals. They want what they have concentrated, and yet digestible. Journals are multiplying very rapidly which are mere advertising mediums, the medical articles being nothing more than stuffing. In one such paper, recently, the editor, getting short of copy, printed the ten commandments, adding the words "by request." I may have assumed unjustly, in this instance, that this was done for stuffing. The editor may have been a stickler for the old codes.

The daily journalist ought to take more responsibility than he does in sifting medical advertisements, most of which are trash, some of them criminal. And the local items deserve a critical glance as well as the advertising column. No good physician includes printers' ink in his *materia medica*, and so long as our code excludes from the regular school all who frankly and honestly advertise in the newspapers, it is more than a matter of questionable taste—it is rank dishonor—for a regular physician to secure, by round-about ways, gratuitous notice of his achievements.

It is only a few years since pharmacy became an independent science. Some of us can remember when doctors hung their attics with bunches of herbs, concocted and compounded their own remedies and dispensed them from huge saddle-bags. Now colleges of pharmacy abound, and graduate young men possessing knowledge of their work far superior to what could have been obtained, by a busy doctor,



under the most favorable circumstances. It is interesting to note the spirit of adventure that has developed in this new profession. A zeal for bringing to light and to our use what has proved good in the hands of obscure tribes and distant nations has led to the expenditure of much money. They not only seize upon the observations of missionaries, the researches and discoveries of voyagers and travellers, but there are manufacturing pharmacists who keep men journeying through Central and South America for the express purpose of finding new remedies. Intelligent and scientific men, in other professions, have not thought it below their dignity to spend years in such research. Dr. Schwienfurth, well known as a botanist of high rank and noted as an explorer, was first led into "The Heart of Africa" in the interests of botany and pharmacy. Not that their work has been always beneficent, as witness the substitution of absinthe for quinine in the French army in Algiers, and its deplorable results on the French nation. Unfortunately, too, their business enterprise sometimes outstrips their zeal for true science. There is too much haste to foist untried remedies on the market, the elixirs are weak, the tinctures inert, and far too much lard is rubbed into the mercurial ointment.

When the doctor refused to be longer hampered with his saddle-bags, and started off express, leaving them as freight behind him, he had no idea that the freight would so soon switch off to an independent line. But druggists are beginning now to usurp the functions of our profession. They frequently prescribe over the counter. They expose their remedies for sale, the wrappers and labels of which show doses and for what ailments they should be employed. I find on inquiry that it is a common habit for them to serve medicinal substances in soda water. Leaving out of the question the possible ill effects of soda water, I find that potassium bromide, aromatic spirits of ammonia, soda mint, sodium bicarbonate, acid phosphate, tinctures and elixirs are in very frequent demand.

The consumption of drugs in this country is assuming enormous proportions. Think of two hundred tons of the

bromides and one hundred and fifty tons of chloral hydrate being used annually! Among the causes for this may be reckoned the overcrowding of the medical profession, the multiplicity of drug stores, the establishment of free dispensaries, patent medicine advertisements, and the desire of people for medicines to work cures upon derangements of digestion, while they maintain the cause of their trouble by over-eating and drinking. The public should be instructed how to properly estimate drugs and to regard every unknown medical agent as dangerous, if not positively endowed with harm.

The present drift of human thought is toward scientific enquiry. The phenomena which were perhaps formerly observed, but being regarded merely by the eye of idle curiosity, were again lost to human knowledge, now under the eye of the trained observer, yield fruit rich in utility. The use of lenses had long been known before the chance arrangement of them by a spectacle maker, for the amusement of his children, brought near the spire of a distant cathedral, and led to the invention of the telescope. The respiratory murmur and heart sounds had been heard many times before Laënnec, the lucky inventor of the stethoscope, heard them through his roll of paper. The incident which led to the development of Gray's telephone was an observation casually made by him in a bath-tub. Where formerly nature had only here and there an interpreter, there is now a vast army of well-trained minds reading her open page and searching into her deeper mysteries.

The genius and mechanical skill of the Electrician have given into our hands for the successful diagnosis and treatment of many diseases an agent which, until recently, was administered only by empirical men in an hap-hazard way. Two generations ago, men otherwise well educated, were absolutely ignorant of this subject. They knew nothing about the phenomena of self-induction, of the relation of electricity to nerve function, of the electrical resistance of the skin and other tissues of the body to the induced and especially to the constant current. The old practitioner had little guidance in the use of his clumsy battery. Whether

his patient suffered from disease of the posterior or lateral columns of the cord, from paralysis, whatever variety of muscular contraction, affections of the general nervous system, of the eye, ear, or other organs of special sense, they received the same dose, always given in the same way. His idea of treatment by electricity was simply to give a shock. He knew nothing of the finer applications, as by electrolysis; and "interrupted current," with him, only signified the machine out of order. Now it is an every-day occurrence to divide a flash of lightning and use a part of it to split a hair. The appliances are changing and their application multiplying so rapidly that we can but wonder how the next generation will regard our view and use of the subtle fluid.

The Instrument-maker deserves a share of the credit usually ascribed to us in difficult operations. A modern case of instruments is no more like those with which Brodie and Cooper, Valentine Mott and Jonathan Warren did their work, than is a modern steam-plough like the old wooden affair with which Elisha's twelve yoke of oxen scratched the hills of Judea.

The Astronomer, once a near neighbor, moved out of the doctor's neighborhood one or two hundred years ago. There is no star-gazing done by the physician now, save by the country practitioner in his long night drive over the hills, but the time was when he studied the motion of the heavenly bodies and worked astrology for all it was worth. There are physicians in every age who, like the angler, consult not their own taste, but that of their fish, in choosing their bait. Our offices are now moved down to the ground floor, and the sign of Jupiter, which heads our prescriptions, in slightly altered form, is almost the only survival of the astronomical doctor. Who knows but, in the revolving cycles, medicine and astronomy may be found again in conjunction, and students of medicine be searching star-dust for germs and microbes?

The doctor of the present day has a far easier time in some ways and a far harder time in others than his predecessor. For, while the results of the labor of our kindly neighbors are exceedingly helpful to the physician, they also

make greater demands upon his time and energy, and require him to be ever on the alert to avail himself of them. We tire our lives out with the very means which are necessary for successful competition.

It is this excess of work that narrows many of our men down to specialism. It is a misfortune for a young man, no matter how talented he may be in one direction, that his practice should lie exclusively in that direction. The knowledge of the human body is coming to be so exhaustive that the life of no one man is long enough to grasp it. The multiplication of new books, of new methods and new remedies makes knowledge bewildering. Specialism thus becomes a real necessity, and yet the influence of special practice is so narrowing that, whenever and wherever practicable, it should be combated.

The common forms of ordinary illness make up the burden of our work, and the good all-round doctor fills the largest place in the profession, and is the most apt to succeed if talent and opportunity afterward divert his energy into a special channel.

Bidding adieu to our scientific friends, let us now pay our respects to our neighbors of the so-called learned professions, the Instructor (for at the present day he must be included in the list), the Lawyer and the Clergyman.

The schoolmaster, in his care of youth during the most critical period of their lives, is brought into intimate relations with the doctor. In fact, the doctor is not always independent of his services, for himself. I remember that some years ago a letter of my own was returned by a patient in the country, with this indorsement: "Dear Doctor, I can't read this, my daughter can't read it, and we have called in the schoolmaster and he can't read it. Please try again."

One question that is always open between the schoolmaster and the doctor is this: Is the tendency of modern school life to impair or to promote the health of the next generation? This question is rarely pressed in the case of boys; it arises with reference to the education of girls. Their restrictions in out-of-door sports, the conventional manners imposed upon them, the emotions mingling with

and crowding into this period of their lives, all conspire to make the problem a complicated one for educator and physician. Extreme views on one side of this question have been popular of late among eminent physicians. Dr. Thomas says: "Unfortunately the restless, energetic and ambitious spirit which actuates the people of the United States has prompted a plan of education which, by its severity, creates a vast disproportion between the nervous and muscular systems, and its effects are more especially exerted upon the female sex, in which the tendency to this loss of balance is much more marked than in the man."

Dr. Clarke, in his "Sex in Education," in speaking of the influence of school life upon girls, says: "If these causes should continue for the next half century, and increase in the same ratio as they have for the last fifty years, it requires no prophet to foretell that the wives who are to be mothers in our republic must be drawn from transatlantic homes."

It was such quotations as these, made by Dr. Withers-Moore, that so startled the meeting of the British Association held a few years ago at Brighton, and that have led to a wide discussion of our school-system by English journals.

Statistics do not sustain these views. That admirable organization, the Massachusetts Bureau of Labor Statistics, took this question up some time ago. An elaborate schedule of questions was answered by over seven hundred woman's schools and colleges, and the total result was that the percentage of those to whom the course was physically beneficial was much greater than those to whom it was injurious.

Assuming that the school is a good one, its methods sound, its teachers wise and kind, its sanitary condition as good as that of the home of the pupil, and that it is better may generally be claimed, the question is limited to the effects of intellectual work itself.

What does a good school do for a girl? It gives her system and method. It takes her mind from herself and places her under a steady control, which she could not secure by efforts of her own will. In her going to and from school it secures to her daily and regular exercise in the open air. It

secures to her the sympathy and society of those of her own age and the pleasurable excitement of emulation. All this is apart from the fact that intellectual activity is, in itself, conducive to bodily vigor, and that she may be gaining knowledge that will help her to a better understanding of her own body and the uses of her life. Is it not true that when a physician is called to a young girl, somewhat ailing, his first advice usually is, "Take her out of school," without considering these advantages from which he takes her. It is only in rare instances that the parents have leisure to take up the work of the school, in addition to their usual cares, and then the question comes to the mother, "What shall I do with her?" The physician must consider that the girl has a mind as well as a body. If over-active, it will be excited too much, whether in school or not. Out of school, without control and in an irregular way, the mental work may be more detrimental. If the mind is dull, it will suffer from listlessness and apathy, its regular occupation being taken away. Do we physicians consider enough the great number of those whose health is not only unimpaired, but is promoted and confirmed by the regular and healthful exercise of school? We must remember that this period of life is one when illness is frequently connected with mental disturbance, and whatever conduces to real mental discipline strengthens bodily self-control. Is not a mind nourished

"With the fairy tales of science, and the long result of Time,"

more healthful than one occupied by the gossip of society and frivolities of fashion?

It is not my purpose to enter into a discussion of the higher education of women, but may not the objection sometimes made, of its tendency to repress physical development, be met by the claim that it tends rather to postpone maturity? Near the place where I once practiced, in an outlying district, a healthy pine upland having pure water, there were about forty families. The children had scanty school privileges. The people lived in a primitive way, and the girls were in the open air as much as the boys. The girls married at fifteen years, or under, and a more puny,

sickly set, less fitted for maternal duties, I have never seen.

It is too soon, however, to pass judgment on the subject, when not a generation has gone by since the advantages of higher education were open to women.

In what we have said thus far about the school, we have assumed that its sanitary condition is good. To promote this is plainly a physician's public duty. There should be on every school-board well-educated physicians, and a more thorough system of medical inspection should be made the rule, both in public and private schools. Were this the case, more attention would be given to habits of sitting and standing, to the care of the eyes, to the worry and overwork attendant upon too much study at night.

The schoolmaster takes more kindly to our suggestions now than formerly. He no longer says, as of old, that he is not there to teach children to play. On the other hand, the foundation of education is now laid in childish sports and games. Much has been done, though not enough, to abridge the hours of mere intellectual work, to multiply recesses in the open air, in some cases to provide warm lunches, and, in the best schools, to secure regular and frequent exercise between the hours of recitation. In many instances industrial work has been introduced with good results. Habits of body are early formed, and it is a duty, long neglected by educators, to see that children are placed under favorable circumstances for forming them.

Nothing can be more unjust than to require those children who are to gain their future livelihood by manual labor to spend their early years in brain-work—training the reason and judgment before they are fairly developed, and leaving the eye and hand unskilled until the bodily habits are fixed. Too often a man grows out of school and all his life has to work with brain and conscience to do what he might have accomplished through his nervous ganglia, if he had had the right physical training.

The subject of athletics in schools and colleges requires a moment's consideration. The nature and uses of exercise have been, and are still, greatly misunderstood. What is needed is an education of the muscles, organs and functions

of the body to such a standard of perfection that the brain may be aided, not hampered, in its working. The real object is not so much to be strong as to be well: not to lift great weights, travel great distances, row forty-two strokes to the minute, but to have a well-poised and symmetrical frame, a heart that never weakens in its regular pulsation, a nervous system that will hold its vigor under the surprises and depressions of real life.

Hard by the doctor lives the lawyer, generally opposite. They see little of each other except when the lawyer gets the doctor "on the hip" in the court-room, or the doctor gets the lawyer on his back in the sick-room. It is always nuts for the lawyer when he gets the screws on the doctor. How he delights in launching out hypothetical questions and submerging him with his own seeming contradictions! No knee-shaking, however, characterizes the tread of the doctor as he approaches the door of the sick-room. It makes a vast difference whether a man is "lying right up and down" or horizontal. "Where be his quibbles now, his quilllets, his cases, his tenures and his tricks?" The doctor dares even to look at his tongue, and finds it now no longer than any other man's.

Speaking seriously, our present relations with the bench and bar are so complicated as to give dissatisfaction to all concerned. We are called into court and are paid to testify as partisans, whereas expert testimony should be given wholly without bias. A record of the testimony of any case of importance furnishes the example of a public disagreement of witnesses called as experts, which tends to bring discredit upon that class of evidence. The possible effect of such contradictions upon the mind of judge and jury is obvious, and might readily lead to a miscarriage of justice. In the celebrated Hoyt will case the stand was occupied many days by prominent medical men, and thousands of dollars were paid therefor. The judge, in summing up, dismissed the whole matter of expert evidence with one sentence, saying that it was so contradictory and so evidently purchased that he could attach no weight to it whatever. This important practical point should be kept definitely



before the profession, until their influence is used to have the law of expert evidence so changed that experts shall be summoned as witnesses of the court, rather than of the prosecution or defense. It would be unjust to attribute to the honorable and high-minded men who constitute the legal profession, as a whole, the custom, so prevalent, of hounding physicians by prosecutions for malpractice. But nine cases out of ten would never have been brought had not the original suggestion come to the patient from some shyster. No way has yet been invented by which the physician can bring the lawyer to book for his cases of malpractice. That errors are made in our profession we freely allow, but claim that they are quite as frequently made in the other.

But let us not forget that we are making neighborly visits, and that, though we must have our little tiffs with the lawyers, we are, after all, good friends. So we will give him a cordial handshake and a hearty expression of good-will, before we turn away to knock at the door of the Reverend Doctor.

It has been said that the study of medicine with its constant reference of effects to physical causes, leads the mind toward materialism, and it has sometimes been intimated that the theologian, in his far-sighted survey of the world of spirits, loses his insight into the affairs of the present. But however different the views and methods of the divine and the physician may be, they have strong bonds of sympathy in the nature and aims of their work itself. Both are healers of men, and the occasions are many where they can aid and strengthen each other. Whatever tends to purify and ennoble the morals of a community tends toward health, and in measures of sanitary and social reform the minister and doctor stand side by side. It is true we are not very good church-goers and that the medical profession contains many sceptics, but the most sceptical of physicians never objects to a calm religious trust in the breast of his patient, and most of our number will gladly bear testimony to the efficient aid we have received, in our work, from the cheering counsel and sympathy of the wise pastor in the sick-room. It is something to be noted that, among the meddling

visitors in the sick-room, the minister invariably observes the law of courteous reticence. In my own experience I have never known an exception nor heard a complaint on this score. While gladly paying tribute to his professional courtesy here, we wonder all the more at the ease with which nostrum-venders can borrow the names of most highly reputable clergymen for their hardly reputable wares. But this is a trifle. He has a much more serious charge to make against us. Notwithstanding that the general influence of the medical profession is toward temperance and morality, the religious teacher and reformer has a reasonable ground of complaint in the too general prescription of alcohol and opium by many physicians of the present day. There can be no successful practice of medicine without these remedies. Every intelligent practitioner knows that there is an absolute necessity for their frequent use. But many a man's life has been wrecked by the very appliance that has been cast to him as a life-preserver. Druggists tell me that when a physician prescribes a mixture containing alcohol, if it be at all palatable, the order to refill it usually comes again and again. Even more dangerous than the reckless use of alcohol is the inconsiderate prescription of opiates. The physician, tired and disgusted with the exaggerated complaints and imagined ills of a splenetic patient, is sometimes strongly tempted, for his own ease, to prescribe soothing remedies, not demanded by the disease itself. It is largely our fault, and an alarming fact, that the community is getting to be very familiar with the pleasurable comforts of opium, while there seems to be an imperfect knowledge, or utter disregard, of its baneful properties. Druggists sell it openly, without question. Patent medicines contain it, without published warning. Worst of all, it is fed to infants, often by mothers who little suspect what they give. One lately told me that she had given eleven bottles of Mrs. Winslow's soothing syrup to a lusty looking boy of as many months. Analysis shows a grain of morphine to each bottle. Would it be a wonder if he takes kindly to that drug later on, if necessity should require its prescription? I know of a lad ten years old whose parents were lately dum-

founded on finding that he was hoarding his pennies only to be spent for paregoric.

The modern training school for nurses will have much to answer for in the instruction they give and the facilities they offer for becoming familiar with the hypodermic syringe. When the young ladies get away from the restraints of their hospital life, I very much fear their womanly sympathy will lead them to resort early and often to this instrument, the use of which, I believe, the doctor should rarely yield to other hands than his own. The physician cannot justify himself in limiting his views of such remedies to their mere physical effects. He is bound in honor to hold in view their moral and mental results. Just here the doctor's place adjoins the minister's premises. On the other hand, the clergyman is often burdened, in his care of souls, by the gloom and depression of parishioners who need a change of diet more than a change of heart. As the doctor must keep in view moral effects, the clergyman must not be blind to physical causes.

From the interdependence of the learned professions each profession gains depth, breadth and solidity. As the general practitioner becomes a wider man than the specialist, so the professional man who cultivates close relations and active sympathy with men in other professions gains, from the contact, far more than he loses by attrition. It is also a good thing for a man to have an avocation as well as a vocation. Even a superficial knowledge of art, music or natural history may save a physician from himself, give him a fad, and so relieve tension. But we want no interdependence here. Let us have no amateur physicians.

Turning now to our critics, for we always have them among our neighbors, we find them generally among the well and strong. They call us hard-hearted, when none but kindly motives influence and possess us. In the matter of vivisection, for instance, according to the usual idea which is entertained, the physician is inhumane, wanton and cruel. They ignore the positive physiological and surgical knowledge which this act affords. What do they care that Galen, by this means, demonstrated the existence of blood in the arteries, that Harvey studied the movements of the heart, that Malpighi saw the capillary circulation in the lungs of

the frog? They do not know, or care, that our present precision in methods of physical diagnosis, such as auscultation and percussion, is largely due to the exposure of organs in the living animals. Practical men refuse to accept, as practical, the researches of Charles Bell, John Hunter, Claude Bernard, Pavy, Flint, Mitchell, Ferrier, Horsley, Fritsch, Hitzig and Goltz. Yet these diligent workers have brought out a far better knowledge of disease and placed modern surgery on much firmer ground. For the monkeys and cats whose brains have been exposed, untold generations will reap beneficent results. The discovery of anæsthesia called out a sentiment that shows that people are hard to please on either hand. When Sir James Y. Simpson, of Edinburgh, had introduced the use of chloroform in midwifery, a Scotch clergyman denounced the use of the anæsthetic as “a *decoy* of *Satan*, which apparently,” he said, “offered itself to bless the woman, but in the end would harden society, and rob God of the deep, earnest cries for help, which arise in time of trouble.”

It is assumed, by his critics, that the physician must become hardened and callous from his long association with pain, while in reality the contrary is the fact. We are not passive witnesses of this suffering. Every new case calls for new exertion and self-denial, and while experience gives firmness and self-control, it at the same time deepens and widens the power of sympathy. Of course no physician practices medicine for many years, if he be anything of a student of human nature, without being instructed, as well as amused, by the different phases of character shown by his neighbors. What lessons do we all learn by the bedside of patient sufferers, and what cheer comes to us from gratitude poured out in unstinted measure, often far beyond the value of service rendered. Is there any one of us who cannot say with Wordsworth—

“ I’ve heard of hearts unkind, kind deeds  
 With coldness still returning ;  
 Alas ! the gratitude of men  
 Hath oftener left me mourning.”

It is a common saying that half the world does not know how the other half lives. But the doctor visits high and

low, goes from the mansion to the hovel, and sees all sides. He knows that the ostentatious subscriber to public calls often treats his family with niggardly parsimony; that the man who is considered a churl on 'change is yielding at home, and counts no sacrifice too great, no expenditure too lavish, for those he loves.

The painful scenes which we have to witness are soothed to us by the tenderness and love which they evoke. This intimate knowledge of families and family life opens up to us a world denied to others, and more than compensates for the deprivation of so called society. Wealth and social position dwindle into small import when one stands beside the death-bed or the cradle. I have seen a mother struggling hard for existence, with a drunken husband and a large family of children, grieve over the death of an imbecile child as deeply as any mother could mourn for a child of promise, reared in wealth and luxury.

We generally usher a new arrival on this planet to quite as hearty a welcome in the house where the fare is poor and apparel scanty as where wealth and art have been freely bestowed in dainty devices for comfort. I have a picture in my memory of a night visit made to a house of two rooms in the country. There being no fences about, the horse was driven up to the only door and the hitch-rein taken inside. A pine knot from the fire, brandished in the air, did not give light enough to prevent my stepping on a yellow dog and stumbling over a trundle-bed full of children, into a pen built into the corner, full of more children. The absence of candlestick, wash basin, cup, teaspoon, and nearly every other comfort, except children, made me wonder how they could dispose of the new comer. An antiquated hair trunk was emptied of its contents, the few decent garments of the entire family, and I left the baby ensconced in it, the center of admiring surprise on the part of the children, and the object of happy congratulations on the part of the parents. There is no end to the pictures one can draw from his memory, pathetic, tragic, humorous and grotesque.

We do not forget that our desultory wanderings were limited, in the outset, to the social and external side of a

physician's life. We are forbidden, therefore, by the scope of our remarks to linger at the bedside or to enter the hospital ward. It would be easy to extend our visits, but time brings us back to the occasion and the moment. And now at the end of our excursion, with its brief calls upon our neighbors and hasty glimpses at their affairs, we come back to the threshold of your own door, not to say adieu, but to bid you welcome to our number, to the arena of competition, to the field of our labor, to the rich and varied experience of active life.

Among those who join me in giving you this hearty greeting, I see, for the first time in twenty-five years, several of my own classmates, and I appeal to them to confirm me in the statement that a physician's work, however arduous and exacting, is full of pleasures, triumphs and high rewards.

Life flows more swiftly now than twenty-five years ago. Its springs are deeper, its streams are broader, its currents more intricate, its channels more perplexing. Your life-work means more to you than ours could mean to us. But you, on the other hand, are, or should be, more staunchly built, more fully equipped, more richly freighted, and we wish you Godspeed on your voyage, with the hope that you will come into a fuller prosperity, a greater usefulness and a more ample reward than that upon which we congratulate ourselves.

We appeal to you to cultivate a broad catholic spirit in your intercourse with each other, a fraternity with men of other professions, a deep sympathy with all humanity, and a profound reverence for universal truth.

"Quit you like men, be strong."



